

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.  
**10607088**  
APPLICANT(S)

FILING DATE  
**06-26-03**

CLAIMS						
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
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6						
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8						
9	1					
10		1				
11		1				
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50						
TOTAL IND.	1					
TOTAL DEP.	9					
TOTAL CLAIMS	10					
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